



**OGDEN LEGION PIPE BAND**

**EXPENSE CLAIM FORM 2008/09**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

POSITION: \_\_\_\_\_

CATEGORY: \_\_\_\_\_

**EXPLANATION OF EXPENSES**


TOTAL EXPENSE: \_\_\_\_\_

\_\_\_\_\_  
**Signature**

**\*\*\* DETAILED ORIGINAL RECEIPTS MUST BE ATTACHED\*\*\***

Please return completed forms to the Treasurer:

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For Administrative Use Only

CHEQUE # \_\_\_\_\_

ACCOUNT: \_\_\_\_\_